



WOODHALL SPA.

CASES, RESULTS, AND REMARKS.

BY

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SECOND EDITION.

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PREFACE.

I HAVE ventured to record a list of cases of various maladies treated by the WOODHALL SPA BROMO-IODINE WATER. A perusal of these will at once show that it has been my object in writing these cases to put on one side all questions of theoretical pathology; it has been rather my endeavour to use the old nomenclature, to give a simple narrative of the facts as they have occurred, for, after all, we must learn from experience—theories vary, facts are eternal.

My experience as medical officer at Woodhall has spread over seven years, and day by day I am becoming more convinced that we have in the natural water of this Spa a curative agent which is of unique value in many forms of disease which have resisted treatment at other Spas, and other remedies.

I would like to say that if any member of my profession has a desire to know more of the chemical character of the water, its mode of use, or its applicability to any particular case, it will be a great pleasure to me to place any special knowledge, which my position enables me to possess, entirely at his disposal.

It has been suggested to me by several members of the medical profession that fuller particulars of Woodhall Spa and its neighbourhood would be acceptable and useful in guiding their judgment respecting their patients. This suggestion I have endeavoured to carry out, and I now have the pleasure in placing before you the following notes which I hope will embrace all the knowledge which is required.

Yours, &c.,

C. J. WILLIAMS.

1894.

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History of Woodhall Spa.

IN the year 1811 the late Mr. John Parkinson was sinking a shaft for the purpose of discovering coal, and when the borings had reached the depth of 540 feet a stream of water, tasting salt and of a high specific gravity, rushed into the shaft. This stream was diverted with difficulty, and the operations continued until a depth of 1,000 feet was reached, when the enterprise was abandoned, no coal having been discovered.

About the year 1840 the late Thos. Hotchkin, Esq., Lord of the Manor, was interested in the matter, and was so impressed by the curative value of the Bromo-Iodine water that he expended nearly £30,000 in building an Hotel and Bath House. Until the year 1887 the place grew in reputation, and at this period the property was purchased by a Syndicate of Gentlemen connected with Lincolnshire, who enlarged the Hotel, reconstructed the Baths, added every modern apparatus for using the waters, and also built several houses.

During the last seven years there have been a number of dwelling-houses, shops, &c., erected, and gradually the village has grown until it now includes over a hundred residences.

SITUATION.

Woodhall Spa is situated on the Horncastle branch of the Great Northern Railway, about mid-way between Boston and Lincoln, and can be reached in four hours from King's Cross Station.

During the summer months a through carriage is attached to the 3 p.m. train from London, but by all other trains it is necessary to change at either Peterboro' or Boston, and visitors should watch for Kirkstead station,

the junction for Woodhall Spa, where it is necessary to again change, as instances are on record of travellers being carried on and having to spend the night in Lincoln.

Passengers from Manchester or the North travel *viâ* Lincoln.

ACCOMMODATION.

During the last seven years the accommodation for visitors has been increasing rapidly, until at the present time, in addition to the two Hotels, there are numerous lodging houses, boarding houses, and shops. The station is not more than one-third of a mile distant from any house, and is within 300 yards of the baths.

The *Victoria Hotel*, which accommodates about sixty people, must always be the principal resort of visitors, as its proximity to the baths, which it almost adjoins, will be considered by many a great point in its favour, and now that it is possible to obtain baths of the mineral water in this building, the majority of visitors will, no doubt, prefer residing here during the winter and colder months of the year.

Added to this, it stands in grounds sheltered on the north-east by woods thick enough to break the severity of the wind even from that quarter; whilst its gardens, some four acres in extent, are most charmingly laid out, affording a pleasant shade during the heat of the summer, where visitors can enjoy the cool retreat of the pines and inhale the air redolent of their perfume.

The *Eagle Hotel* faces the station, and can receive about thirty visitors. It is situated in a large garden, and has its own tennis and croquet lawns.

A striking feature in Woodhall are the villa residences, mostly of Queen Anne pattern, which have been erected within the last few years. They are built on wide roads, on each side of which an avenue of trees has been planted,

and as nearly all the houses are detached or semi-detached, there is an absence of that crowding which is so prejudicial to the health of the delicate invalid.

A list of the lodging and boarding houses, with the number of sitting and bed rooms each contains, will be found on page 76.

SUBSOIL AND RAINFALL.

We can estimate with sufficient accuracy for all practical purposes the healthiness of any district by the character of its inhabitants, and it is a well-recognised fact that the inhabitants of Lincolnshire are notorious for their longevity and great physical powers. The Romans, no mean judges of the advantages of places, have left traces behind them in many parts of the county of their energy, their enterprising character, and their indomitable perseverance, whilst the hardy and tough Dane may be said to have left his mark upon the names of the villages, and the type of the inhabitants. These facts make Lincolnshire singularly rich in material of interest to the antiquarian or the anthropologist.

A totally erroneous idea is present in many minds that Lincolnshire is one vast fen. This is due to a great extent to the course taken by the Great Northern Railway, which runs through the flattest and dreariest parts of the county, skirting as it does for many miles the river Witham, and to those who have made the journey from Peterborough to Boston, and from thence to Lincoln or Hull, the country will present but little to interest the traveller; let such an one go to Woodhall and wander from thence to Somersby, the birthplace of Tennyson, and they will not wonder that he sang so feelingly of "The dearness of the distant hills."

Another idea floats about in the public mind which is that Lincolnshire is the very cradle of ague. Such a condition is not met with even in the Fens, where ague

used to be so common, as the land has been so thoroughly drained and highly cultivated that not a single case of this disease has occurred for the past twenty years, so far as we know, in the county.

It would be well also to point out that Woodhall is situated between the Wolds and the Fen, in moorland country covered with heather, broom, and gorse, with a sandy subsoil, through which the surface water quickly percolates.

The rainfall is, according to Mr. S. W. Miller, F.R.H.L., F.M.S., *less than in any other part of England*, while the average fall compares most favourably with other inland health resorts. The quantity registered in 1893 is unique in amount, and the position that Woodhall occupies in the following table should prove a great inducement to invalids who require a dry and bracing atmosphere.

As a residence for delicate children, especially those who are subject to glandular or bone troubles, or any other tubercular tendency, it has proved most beneficial, the pupils at the school presided over by Mr. E. W. Stokoe* rapidly gaining strength during their stay with him. To all parents whose children would be benefited by the use of these waters, or to those who require a pure country air with a good drainage system and an excellent water supply, I strongly recommend Woodhall Spa.

			Average.	Amount in 1893.
Woodhall Spa...	...	...	22·66	17·47
Bath ...	...	...	33·2	
Buxton ...	...	...	54·7	
Cheltenham ...	...	...	31·3	
Clifton ...	...	...	35·3	
Great Malvern ...	...	...	31·7	
Harrogate ...	...	...	33·4	
Ilkley ...	...	...	41·3	
Leamington ...	...	...	27·1	
Matlock Bath ...	...	...	39·0	
Tunbridge Wells...	...	...	32·6	

* See last page.

AMUSEMENTS.

Much has been written in favour of foreign watering places by those who find the amusements of English Spas somewhat tedious, and in such a place as Woodhall the visitor has to depend to a certain extent on himself and on those he meets, to prevent the time from hanging heavily on his hands.

Strenuous efforts have been made for the recreation of visitors, and an excellent tennis ground with four courts has been laid out, as well as a croquet ground and bowling green.

A Golf Club has lately been formed, and visitors desirous of becoming members can do so on sending in their names to the Secretary, Mr. E. W. Stokoe, Ellon Lodge. The Links are situated half a mile from the Victoria Hotel.

Good coarse fishing can be had in the rivers Witham and Bain, and boats can be hired by the week or month for those who are fond of boating. These can be kept at Kirkstead, one and a half miles distant from the Spa.

Riding horses and carriages can be obtained from the Hotel Stables, and during the hunting season the Southwold, Blankney, and Burton hounds meet within reasonable distance.

From June to the end of September a good band plays three times daily, and on certain evenings Entertainments are provided in the Tennis Pavilion.

DOMESTIC WATER SUPPLY.

Lincolnshire, erroneously supposed to be one of the wettest counties in England, has, as lately as 1893, and previously in 1888, shown the falsity of this supposition. It was in these years that many districts were threatened

with a water famine, Woodhall Spa being one of the places that suffered from want of water most severely.

To prevent the dangers arising from such a cause and to meet the requirements of the rapidly increasing population, hitherto dependent for their drinking water on surface wells, the contents of which were often of doubtful purity, arrangements were entered into with the Horncastle Water Company for a constant service from their supply.

This water, of exceptional purity, springs out of the limestone rocks at Cawkwell on the Wolds, and is conveyed to a covered reservoir at Woodhall, a distance of fourteen miles, in iron pipes. There can, therefore, be no fear of contamination from impure drainage or sewage products.

Both the Hotels are supplied with it, and it is satisfactory to state, in the interest of the visitors, that *most* of the lodging house keepers have had their houses connected with the main.

DRAINAGE.

One of the advantages of English Spas, contrasted with foreign health resorts, lies in the fact that the drainage question is more considered, and every endeavour has been made to render the sanitation of Woodhall perfect.

Previously to the present year the houses were drained into sewers, which received both the house drainage and the surface water, but as the village began to increase it was found impossible, owing to the difference in levels, to attach all the new houses to the existing drains. The Horncastle Rural Sanitary Authority determined to put down an entirely new system, dealing with the house drainage and the surface water separately.

They therefore instructed Mr. Herbert Walker, C.E., of Nottingham, to prepare a scheme which would meet the requirements of the case, and he has accordingly put down the "Shone" system of drainage, having a good fall throughout.

The Rural Sanitary Authority have also entered into an arrangement with the Woodhall Spa Water Company by which the drains can be flushed direct from the main, and it is confidently expected by these measures that the healthy condition which has existed in the Spa in the past will be continued under the new system.

One of the most important points is the absence of cess-pools, and this, together with the ventilation of the house drains and the perfect water supply, has kept the Spa free from epidemics, even when epidemic diseases have been rife in the neighbouring villages.

DURATION OF THE COURSE.

One of the first questions a patient asks on arrival is, "*The Duration of the Course of Treatment.*" This it is impossible to definitely state, as so much depends on how the baths agree, and my experience is that the number can only be regulated by carefully watching each individual case, but it may be stated as a general guide that the period of saturation is seldom reached before twenty-one baths have been taken, whilst in some chronic and obstinate cases it may be necessary to continue them until thirty or even more have been given, and it is common for patients to have to submit themselves to an annual course. This is especially true of those cases where the gouty diathesis is inherited, and the proclivity to the formation of an excess of uric acid pronounced.

INTERNAL ADMINISTRATION OF THE WOODHALL WATER.

At the Spa it is customary to prescribe the water to be taken in two or three doses during the day, commencing with a small quantity and gradually increasing the dose, the daily amount for an adult being from 10 to 30 ozs. The first draught should, if possible, be taken before breakfast, and five minutes should elapse between each ounce imbibed; so that if 8 ozs. are prescribed, at least half an hour should be occupied in drinking this quantity. If the patient is strong enough, gentle exercise may be indulged in during this time, as it assists the absorption of the water. In no case must any food be taken within half an hour of drinking the water.

The next dose should be taken about mid-day, and the third about 4 p.m., the same mode of drinking being observed; for if the water is swallowed in too short a time, a purgative action from non-assimilation of the chlorides is often the result, or a feeling of sickness with flatulence, or a headache is observed.

Various modifications have to be made to suit the idiosyncrasies of individuals, some patients being unable to absorb the water when the stomach is empty, whilst in others it is necessary to give it warm, or even to dilute it with plain hot water before it is easily borne.

When the water is first taken, especially in those who assimilate it easily, constipation is often caused, but as the dose is increased a copious daily evacuation results.

The quantity of urine excreted is considerably increased whilst under the influence of the water.

EXTERNAL APPLICATION OF THE WOODHALL WATER.

We attach great value to the effect of the action of this water when applied in different forms to the surface of the body.

THE FULL OR RECLINING BATH.

When it is thought advisable to immerse the body completely in the water we advocate a bath to be taken either before breakfast or two hours after a meal. In some cases it is sufficient if such a bath is taken every other day, but where it is desirable to produce a state of saturation in a limited time, or where the disease will only yield to the most stringent measures, a daily bath is recommended.

The temperature and the time spent in the water must be fixed by experience. At first we advocate about ten minutes, gradually increasing this until a much longer period is reached.

The action of the bath and waters may be much assisted by the use of compresses of the Mutterlauge, which must be applied evenly and tightly, and covered with a water-proof sheeting, so that no evaporation takes place. If used in this manner they act like poultices, and if continued long enough, an eczematous rash is produced—the “crisis,” as it is termed by hydropathists.

Experience teaches that in some cases, especially in the aged, and in those who have heart troubles, immersion of the body in the water is too exhaustive, and in such cases some of the undermentioned baths prove more beneficial.

SITTING OR SITZ BATH.

We employ this in the treatment of piles and uterine conditions. This bath is very convenient for those who have the water from a distance.

THE VAPOUR BATH, GENERAL AND LOCAL.

The latter has proved most useful either as an alternative or an adjunct to other treatment, in cases of gouty or rheumatic enlargement of joints. This form of vapour bath is usually combined with massage of the affected limb.

MASSAGE DOUCHES.

Besides all the usual kind of douches, rooms have been specially fitted up in order that wet massage may be carried out as efficaciously at Woodhall as on the Continent, and thoroughly experienced attendants have been engaged.

NASAL DOUCHES AND SPRAY PRODUCERS

Are also used in cases of chronic catarrhal conditions of the nose, posterior nares or pharynx.

OBJECTS OF INTEREST IN THE NEIGHBOURHOOD OF WOODHALL.

Boston is within a short railway journey of Woodhall, and is a town which has a great attraction for Americans. Longfellow writes :—

“ St. Botolph’s tower. Far over leagues of land
And leagues of sea, looks forth its noble tower,
And far around the chiming bells are heard.”

The town may be represented as analogous to the port of Lincoln, as it stands on the Witham and a short distance from the sea. Historically it is full of interest, but its commercial position was at one time of great importance, being only second to London as a seaport. Gradually, however, the town as a port deteriorated, and although attempts were made to deepen the Witham orifice, no good

results ensued until the construction of the new dock. The most conspicuous event in the history of Boston is the emigration of some of the population in 1620. The "Pilgrim Fathers," headed by John Cotton Key, sailed in the *Mayflower*. These founded the town of Boston in America.

The Parish Church of St. Botolph's, known by the inhabitants as "Boston Stump," is in structural capacity, the largest church in the world. It was built during the reign of Edward III. The interior of the church is colossal and full of interesting brasses, &c. The tower is the chief object of interest, and is 288 feet from its base to the top of the vanes. It rises in three gradually smaller stages, and is visible forty miles away across the Wash, and on the Norfolk coast. Jean Ingelow is a Boston woman.

BLANKNEY.—This picturesque village is eight miles from Woodhall. The Hall, the residence of the Right Hon. H. Chaplin, M.P., is a large mansion, standing in a well-wooded park. The Church, which is alone well worth a visit, was rebuilt in 1880. In the Chancel is a slab of John de Glori. In the North Chancel is a magnificent effigy of Lady Florence Chaplin, whose tomb in the churchyard was sculptured by Boehm.

The Blankney stud farm contains some of the best mares in England, together with the stallions Galopin and Friar's Balsam.

The kennels of the Blankney Hunt are situated in the village, and are most complete.

LINCOLN—the very name of which is full of interest. By the Britons it was called *Caer Lindcoit*. The Romans called it *Lindum*, which is generally accepted as being the derivation of *Linden*, and denotes "The hill fort of the pool." The following embraces the principal objects of interest to be explored in this city.

The Cathedral, generally called the Minster, although it was never a monastery, is magnificently situated on a hill overlooking the town, and with its varied form of

architecture, its splendid Nave, its tower, its great Transept, its Presbytery or Angel Choir, which, as Mr. E. Sharpe writes, "Exhibits in every part a refinement and elegance, as well as a delicacy of finish in its minutest details to which it would be difficult to find a parallel in the whole range of Gothic art." All these will amply repay any visitor for the short journey from Woodhall.

In addition the city has several Parish Churches, the Bishop's Palace, the Castle, the Jews' Houses (Norman), the Stone Bow, a Fifteenth Century Turn-gate, Newport Arch, the only Roman gate in England except Colchester, and a number of old houses. All these are of deep interest to the antiquarian and present features of interest which are not to be surpassed by any town in England.

HORNCastle is within a few minutes' journey by rail and has a fine old Parish Church, on the wall of the north aisle of which is the brass of Sir Lionel Dymoke, Champion of England, 1519. In the North Chapel is the monument of Sir Ingram Hopton, who lost his life in the battle of Winceby.

SCRIVELSBY COURT, only a few miles' drive from Woodhall Spa, is the ancient seat of the Dymoke family. It was given by the Conqueror to his Steward—Robert the Dispenser. The present Champion is descended from the granddaughter of Lord Marmion, who married Sir John Dymoke in 1292. The Champion was required to appear in bright armour at the coronation, and challenge the Sovereign three times against all comers, receiving from the officer a gold cup filled with wine. Canon Lodge, in his book, "Scrivelsby, the Home of the Champions," says: "It will be seen that the Dymokes have acted as Champions on twenty-one occasions, and consequently there ought to be twenty-one cups in possession of the family. But the present Champion only holds seven, viz., those obtained at the coronation of James II., William and Mary,

Anne, and the four Georges." The ceremony was last performed at the Coronation of George IV.

KIRKSTEAD, only a few minutes' walk from Woodhall, has the remains of a Cistercian Abbey, founded 1139, by Hugh Brito. This building was originally very extensive, as can be traced by the foundations, but only a small portion of the North-East Angle of the South Transept still exists.

The most attractive feature of Kirkstead is the Chapel of St. Leonard's, a perfect specimen of early English architecture. It has been closed for the last five years as the building is supposed to be unsafe. It is to be hoped that attempts will be made to restore such an unique example of this period of Church or Chapel building. Such specimens are rare enough and ought to be rigidly preserved.

REVESBY ABBEY, the seat of the Honourable Mrs. Edward Stanhope, is about seven miles from Woodhall, and is a modern Elizabethan building, standing in the same place as the old Abbott's Home. The Church, recently restored by Mr. Hodgson Fowler, is well worth a visit.

There is little to be seen of the old Abbey, which was situated in the south of the village, but a ground plan has been carefully excavated, and is in the possession of Mrs. Stanhope. The late Sir Joseph Banks, the celebrated naturalist, lived chiefly here, but he was buried at Heston.

There are two ancient tumuli in this village.

TATTERSHALL CASTLE is within an easy drive of Woodhall. It consists of a keep tower, representing the finest specimen of mediæval brick work in England. It is 112 feet high. The doors and windows are beautifully moulded, and the red brick, toned by age, gives a great fascination to the building. Inside the Castle are several very grand chimneypieces with rich coats of arms. From the leads a good view of Boston Church and Lincoln

Minster can be obtained. The Church at Tattershall was rebuilt by Lord Treasurer Cromwell. There are some fine brasses in this Church representing the builder of the Church and Castle, headless, and without his wife's effigy.

TOWER I'THE Moor is part of a hunting lodge of Cromwellian building built in 1500. Two miles from this the ancient Church of Martin, with normal south door and very narrow chancel arch, can be seen.

SOMERSBY.—A remarkably picturesque village which has become of world-wide celebrity, it being the birthplace of Alfred Tennyson. The Rectory, where Tennyson was born in 1809, is an old-fashioned homely comfortable house, with no special attractions. Those who know his poems will trace some connection between his earliest efforts, such as "Ode to Memory," and this old parsonage.

"The seven elms, the poplars four,
That stand beside my father's door,"

are now diminished; some, however, remained last year. The brook still bubbles on and sings:—

"I come from haunts of coots and hern,
I make a sudden sally,
And sparkle out among the fern
To trickle down the valley."

Somersby is within an easy drive of Woodhall, and those who undertake the journey will drive through some lanes which are typical of rural England.

LIFE AT THE SPA.

It has often been remarked by visitors that notwithstanding the lazy life led during a residence at Woodhall, there has scarcely been any time left unoccupied if the

patient has conscientiously followed out the directions given him for completing his cure.

He has, if strong enough, to rise early, and devote from half an hour to an hour in imbibing the Spa water and taking the necessary exercise before his breakfast, after which the forenoon is passed in bathing and resting after his bath.

The afternoon is devoted to walking, driving, playing tennis or golf, interrupted about four o'clock, with further water drinking.

In the evening the band performs from 7.30 to 9.30. A concert or entertainment is generally given about once a week.

By ten o'clock most of the visitors have retired, the air, which is peculiarly strong and invigorating, increasing the desire for sleep, and this, together with the early rising, necessitates an early departure to bed.



SEASON FOR VISITING WOODHALL.

It is undoubtedly more pleasant to visit Woodhall and submit to the treatment during the summer, but it is an error to believe that good does not come out of the course when taken during the winter months.

A large experience during the most severe weather at the Alexandra Hospital conclusively shows that equal benefit arises at one time of the year as at another. Moreover, the Mineral Water Baths can be obtained in the Victoria Hotel, so that it is quite advisable for those to whom time is important to visit Woodhall any month.

It is pleasing to record that during the year 1893, more than 11,000 baths were given, this number being a considerable increase over the previous year.

CASES ILLUSTRATING SOME DISEASES
IN WHICH THE
BENEFICIAL EFFECTS
OF THE
Woodhall Spa Water
HAVE BEEN DEMONSTRATED.

CHRONIC ARTICULAR RHEUMATISM.

REMARKS ON CHRONIC ARTICULAR RHEUMATISM.

We have included in this group all those cases in which the joints have been for a time the seat of pain; pain increased by movement and pressure, and often coming on in violent paroxysms at night. Crepitation could usually be felt when the joints were moved. In some instances the joints have been enlarged, but we have excluded those cases in which there have been bony outgrowths, arching bones, or destruction of cartilage. These we have described as cases of "deforming articular rheumatism." Many of these cases of chronic articular rheumatism will be found to have slowly crept on, with attacks of acuteness, but without elevation of temperature, and they would appear frequently to be caused by residence in a low, damp district. There are others in which there have been several attacks of rheumatic fever. These persons will be found to become rheumatic on the approach of change of weather, or after exposure to a draught, or after getting wet. Sometimes one joint is affected, sometimes another; the joints are very sensitive and painful when moved. The latter form is very difficult to manage, and is frequently combined with muscular pains and neuralgia.

CASE 1, aged 25 years, had been confined to his bed for twelve weeks with acute rheumatism.

He was much emaciated, was subject to profuse sweats, the digestive organs deranged, the bowels constipated, and the urine loaded with urates. The arms could not be raised above the head, the shoulders and elbows were both affected, whilst walking was performed with the utmost difficulty, the knees being swollen and stiff.

After three weeks' treatment locomotion was possible without pain, and he could use his arms with perfect freedom, and at the end of the fifth week he was able to return to his work, the swelling about the joints having disappeared.

CASE 2, aged 25 years, had been suffering for three months from rheumatism in the back, in both feet, and in the right arm, the shoulder and both ankles being swollen. Five years previously he had been attacked with rheumatic fever, which had left him with valvular disease of the heart.

After a three weeks' course of baths and waters he left to resume work, perfectly free from all pain, all effusion about the joints having disappeared.

CASE 3, aged 21 years, suffering from pain in the back and shoulders, the result of an attack of rheumatic fever.

There was a presystolic mitral murmur.

After a month's treatment he returned to his work, with the pain quite relieved.

CASE 4, aged 21 years, rheumatic pains affecting the lumbar region, and slight effusion in both knees, the pain being so intense that she was unable to sleep at night. She had rheumatic fever three months before admittance.

After a month's treatment she was discharged free of all pain, and the swelling in the knees had subsided.

CASE 5, aged 40 years, rheumatism affecting the ankles and knees, these joints being much swollen. She was quite unable to walk, and suffered much pain, particularly at night.

Has had rheumatic fever twice, the last time two years previously.

She was treated here for one month, when she was discharged, with the joints in the normal condition, free of all pain, and able to walk with ease.

CASE 6, aged 21 years, effusion in the shoulders and knees, with much swelling of sole of foot, and great pain on movement.

He had rheumatic fever two years previously, and commenced with present attack six months ago.

After one month's treatment he could walk without pain, there was no swelling, and he was able to dress himself unaided.

CASE 7.—This case, occurring in a man aged 51, involved the right shoulder, which was stiff, and both knee joints, which were swollen.

After two courses, with an interval of two months between each, the rheumatism began to disappear, and although it is three years ago there has been no return of it.

CASE 8, aged 43 years, both shoulders are stiff, and cannot be raised above the head. The left ankle swollen and painful.

Disease commenced six months before he came under my observation.

He remained at Woodhall five weeks, and on leaving could walk without pain, and had perfect movement with his arms.

CASE 9.—This case, occurring in a lady of 54, involved the right knee, which had been attacked two years previously and prevented her walking. There was great wasting of muscles.

After a six weeks' course, combined with massage, she could walk with ease, and the muscles had much increased in size.

CASE 10, aged 30, involved the left wrist and ankle and both knees.

Had rheumatic fever badly three months before coming to Woodhall.

An eight weeks' course of treatment removed all swelling and all pain.

CASE 11.—This man, aged 64, had suffered for the past nine months, the rheumatism affecting both knees, which were much swollen.

He remained at Woodhall six weeks, and left greatly improved, the swelling having entirely disappeared.

CASE 12.—Aged 33. The wrist and hand were much swollen after an attack of rheumatic fever, which had commenced four months previously.

After four weeks' treatment the pain and swelling had disappeared.

CASE 13.—Occurred in a man aged 45, who for the last two years had suffered from rheumatism in both ankles and knees.

There was no effusion, but slight thickening about the right knee, and the pain was much increased by movement, and at night he was unable to sleep.

After one month's treatment he could both sleep and walk well.

CASE 14.—This occurring in a boy aged 11 years presented some features of great interest. The knees, which were not swollen, had been painful for the past eight months, and at the time of coming under my observation he could not even stand, the pain being so acute.

He obtained very little sleep, the aching being most intense so soon as he became warm in bed.

After one month's treatment he could walk well and sleep soundly, all pain having left him.

CASE 15.—Occurred in a man aged 23 years.

There was effusion in both knees, which were much swollen. He had great difficulty in walking with the aid of crutches.

After three weeks' treatment the swelling had disappeared, and he could walk with ease.

CASE 16.—Occurring in a woman aged 48 years, involved the left ankle, which had been stiff and painful for the past eight weeks.

After one month's treatment was quite cured.

CASE 17.—Occurred in a lad aged 15 years, the left ankle having been swollen and painful for nine weeks.

After one month's treatment he went away quite cured.

CASE 18.—Aged 43 years.

Had rheumatic fever ten weeks before coming to Woodhall for treatment, which had left his right knee very swollen; could not walk, any movement greatly increasing the pain.

After six weeks' treatment all effusion had disappeared, and he could walk comfortably.

CASE 19.—This man, aged 42 years, had for the last two years been affected in the left knee, right elbow, and both shoulders, with pain.

Movement was most limited, and he had great difficulty in dressing himself.

After one month's course he could put his clothes on quite easily, and walk without pain.

MUSCULAR RHEUMATISM.

REMARKS ON MUSCULAR RHEUMATISM.

We have embraced in this class all those cases which we have considered rheumatic, and which affected the fibrous tissues of any structure, excepting those about the joints.

The predominant symptoms in all these cases are diminished mobility, a peculiar stretching pain, and pain induced by pressure or movement. There are no physical signs apparent over the muscle attacked. The pain will be found to wander in some cases from muscle to muscle, in other cases, especially the shoulders, it will remain fixed week after week.

These cases are often very acute, coming on after exposure to a current of air, undue muscular exercise, or some obscure cause, whilst in others the condition creeps gradually, and will spread over a period of years. The pain is generally made worse by cold or damp and improved by warmth. In some instances, however, the pain is worse in bed.

In this group we include those cases of tender skull, which we hear called cephalalgia rheumatica, stiff neck or wry neck.

CASE 20, aged 72 years, was seen by me in 1889. He had suffered for ten weeks from muscular rheumatism affecting both deltoid regions, which had resisted all treatment, and prevented him from raising his arms to their proper height.

After a three weeks' course he declared himself free of all pain, and could move his limbs with perfect freedom and complete range of movement.

CASE 21, aged 37 years. He had suffered for three weeks from rheumatism affecting the muscles of the legs and back, and had also eczema on the right hand.

With one month's treatment both the eczema and pain had entirely disappeared.

CASE 22, aged 20 years. Rheumatism affecting the muscles of the right hip, giving intense pain on movement, and preventing him from using his leg. This had followed an attack of pneumonia, and was of five months' duration.

Improvement was rapid, and after one month's treatment he returned to his work, able to walk perfectly without pain.

CASE 23, aged 74 years. Rheumatism in the extensor muscles of thighs and in the fibrous structures over the sacro-iliac joints. It had commenced six months previously after influenza, and had been gradually getting worse until he was unable to walk, the pain being so much increased by movement. He had valvular disease of both mitral and aortic valves, but had never suffered from rheumatic fever.

After three weeks' treatment the pain was greatly relieved, he was much stronger, and was able to walk freely.

CASE 24, aged 62 years. Rheumatism involving the structures about the knees, shoulders, elbows, and wrists. There was no swelling, but much pain on movement.

The disease had commenced two months previously, and her sufferings were much intensified at night.

After one month's treatment she was discharged entirely free of all pain.

CASE 25, aged 53 years. Rheumatism affecting the muscles about the shoulders and knees. There was no swelling about the joints, but for six months the movements had been painful and embarrassed.

He was only able to remain three weeks, but was then free of all pain, and could move his joints with ease.

He returned in August, the left ankle having become swollen, and after a further three weeks' treatment was discharged cured, the swelling and pain having entirely disappeared.

CASE 26, aged 54. Rheumatic pains in the muscles of his back and thighs, making all movements very difficult and painful.

After one month's course all pains had left him.

CASE 27.—This man, aged 55 years, suffered much pain in the right deltoid region and in the plantar muscles of right foot.

After a five weeks' course all pain had left him, with the exception of a slight stiffness in the shoulder.

CASE 28.—Occurring in a girl, aged 21 years. The muscles of the back and neck had remained painful and stiff since an attack of rheumatic fever ten weeks previously.

After one month's treatment was free of all pain.

CASE 29.—This man, aged 40 years, had, four months before presenting himself for treatment, suffered from rheumatic fever, which had left him with great pain in the intercostal muscles, and in the muscles in front of the thigh.

After twelve baths he was quite relieved.

CASE 30.—This woman, aged 51 years, had suffered since an attack of rheumatic fever from great pain in right shoulder, which prevented her moving her arm above her head.

After one month's treatment she was quite free of pain, and could move her arm with ease.

CASE 31.—This man, aged 36 years, had for the past three months suffered from rheumatism in the muscles about the right shoulder and knee.

After four weeks' treatment was quite cured.

CASE 32.—This man, aged 20 years, suffering from muscular rheumatism of the thighs, supervening on an attack of rheumatic fever, was completely cured with a three weeks' course of treatment.

CASE 33.—A boy, aged 6 years, complained of great pain on moving his arms, cried out at night, and could not sleep. Had no joint swelling or rise of temperature at any time.

After nine baths was quite free from pain.

CASE 34.—This lady, aged 30 years, had for the past four months suffered from pains in the muscles of the right arm and thigh.

After a month's treatment she was completely cured.

CASE 35.—Occurring in a lady, aged 46 years. The muscles of the right arm and left thigh were affected, but the pain was entirely removed after a three weeks' course of baths.

CASE 36.—This man, aged 48 years, had for the past three months suffered from pains in the muscles of both arms, intensified at night and on movement.

After one month's course the pains had disappeared.

CASE 37.—This lady, aged about 50, suffered much from pain in the muscles of the back and neck.

The pain entirely disappeared during her stay of one month at Woodhall.

CASE 38.—This lady, aged 57, suffered much from pains in the muscles of the forearms, with loss of power.

After one month's course the pains had disappeared, and then there was a great increase in the muscular power.

DEFORMING ARTICULAR RHEUMATISM.

REMARKS ON DEFORMING ARTICULAR RHEUMATISM.

By the above table, we wish all those cases to be embraced in which there is an overgrowth of all the structures which build up the joints, but it must be borne in mind that the inflammation or hypertrophy will diminish or cut off the blood supply to the cartilage and the interior of the joints; hence we not only find hypertrophy of bone ligaments and synovial capsule, but, *pari passu*, absorption of cartilage, wearing down of bone and dryness of joint. (*Arthrite chronique sèche.*)

One striking fact has fixed itself on our notice, that is, the common association of deforming articular rheumatism with a tubercular family history, and to many it might appear more accurate if we had cut out these cases in which there is a marked family history of consumption and grouped them with the cases "tubercular disease," but we have thought it more practical to link those cases in which the tissues have not suppurated, and class them in this section.

The enormous amount of lipping of bone which occurs will often cause great deformity and crippling, and where several joints are involved, movement becomes impossible. The joints will also not infrequently become dislocated, especially the little finger, which we have seen almost at right angles with the metacarpal bone. When the hand is the home of the malady, we find a curving and flexing of the metacarpal bones, which causes them to assume a position like a number of steps ; they will also lie over each other like slates in a roof, and they invariably deviate to the ulnar side. A common joint to be attacked is the hip, especially amongst those who gain their livelihood on the land (*morbus coxæ senilis*).

We can have little faith in improving much those cases in which the disease is far advanced, but we do assert that where this complaint has just commenced, or where joint after joint is becoming slowly involved, that repeated courses of this treatment have arrested its progress, and patients who have arrived at Woodhall walking on crutches have left able to walk without them. This improvement we consider has been due to improved general health and absorption of inflammatory material which had not become organised.

CASE 39, aged 23 years. Deforming articular rheumatism of thirteen months' duration, involving both knees, hands and feet, the joints of which were much swollen and enlarged. He had had rheumatic fever seven years previously, which had left a presystolic mitral murmur.

After a month's treatment he had much improved, the swelling had greatly subsided, the pain had nearly disappeared, and he could walk more easily.

CASE 40, aged 25 years. The disease was of seven months' standing and had commenced in the left shoulder, then involving the elbows, fingers, knees, and ankles. There was also pain in the back of the neck.

With a month's treatment the pain had much decreased, the swelling had greatly diminished, and she was able to return home and resume her usual duties.

CASE 41, aged 44 years. Deforming articular rheumatism had commenced three years previously in the fingers, and had since spread, until it had affected all the joints with the exception of the hips and jaws.

There was profuse local and general sweating, particularly at night, with a rapid high tension pulse.

A strong history of phthisis was given, and a highly neurotic temperament was observable.

After a month's treatment she returned home improved, walking with more ease and having less general pain.

She visited the Spa the following year, having passed a better winter; many joints which had previously been much swollen had decreased in size and were more freely moveable.

Within the last two months she wrote me that on looking back she "could trace a decided if slow improvement since first taking the Woodhall baths."

CASE 42, aged 28 years. The disease had commenced in the fingers a year previously, and had also slightly attacked the shoulders and elbows. The left knee was much drawn up and swollen, whilst the right knee was capable of a very limited amount of movement.

There were here present all the ordinary symptoms of the disease, with a family history of phthisis.

She returned the following year for further treatment, and when she left she had practically recovered, being free from all pain, and the general health having greatly improved. The right knee was capable of increased movement, and the left leg was much straighter, so that she was able to dispense with the crutches which she had been obliged to use for the year past.

CASE 43, aged 62 years, first came under my care in the summer of 1889, suffering from deforming articular rheumatism of both knees.

She had during the previous year undergone three courses of treatment at another English Spa, with no apparent benefit.

On arrival she was quite unable to walk, and it was with difficulty that she rose from her chair. She remained here for five weeks with good results, her general health having greatly improved, and the local condition being so much better that she was daily able to walk a mile with but slight discomfort.

She returned in June, 1890, and was then able to accomplish three miles with comparative ease.

CASE 44, aged 46 years. Suffering from deforming articular rheumatism of right knee and left wrist. The disease had commenced three years previously, and the joints were swollen and painful.

He remained here one month, during which time the wrist had greatly improved, the knee had become much stronger, the swelling having diminished, and he could walk on that leg without feeling pain.

CASE 45.—This woman, aged 50 years, was first seen by me in April, 1890, suffering from deforming articular rheumatism.

The disease had commenced two years previously in the fingers, and had since spread to the ankles, knees, elbows, and shoulders, all these joints being puffy and enlarged, with, in many instances, great effusion.

There was here again a phthisical family history, combined with a neurotic temperament.

Her general health was very debilitated, and she was unable to walk or dress herself.

Marked benefit resulted from a month's treatment here, and she returned in October for a further course, leaving greatly improved in health, able to walk a fair distance, and nearly free of the pain which had been a most distressing feature in her case.

CASE 46, aged 34 years, was first seen by me in June, 1890, suffering from deforming articular rheumatism of four years' duration.

The disease had commenced in the shoulders, and had since involved the knees, fingers, wrists, and elbows, and slightly the ankles and feet.

A phthisical history, with all the common symptoms of his complaint, were observable. He underwent a month's treatment, returning in November for a further course, and left greatly improved, the joint swelling having much diminished. There was increased power of movement, and he was able to walk with perfect ease.

CASE 47, aged 44 years. Deforming articular rheumatism, which had commenced seven years previously, but had rapidly advanced during the last four months.

It began in the knees and feet, gradually involving the fingers and hands, and also the elbows and shoulders.

There were here physical signs of weakness about the apices of lungs, with a family history of phthisis.

Although on admittance he was unable to walk 200 yards, he could after a month's treatment cover two miles without feeling fatigued.

The joints had greatly decreased in size, the general health was much improved, and there was a marked absence of the local sweatings with which he had been greatly troubled.

CASE 48.—This occurring in a gentleman aged 21 years, commenced three months previously in the metatarso

phalangeal joints of right foot, and had since involved the metacarpo phalangeal joint of the thumb of the right hand. There was also much swelling in the fibrous structures under the right heel. He was of strumous appearance, and had had rheumatic fever seven years previously.

A six weeks' course did much to arrest the disease, and he left with the swelling greatly reduced and able to walk without pain.

CASE 49.—This lady, aged 46 years, had five months previously been attacked with deforming articular rheumatism in the ring finger of the left hand, since when it had spread to the right hand and both feet.

She was much improved by a month's treatment, and left with the swelling much diminished.

CASE 50.—The disease, occurring in a lady aged 55 years, had rapidly involved all joints except the hips, having commenced nine months previously. There was a family history of tubercular disease, and the patient was intensely neurotic.

She was greatly benefited by a six weeks' stay at Woodhall, the pain being much relieved, and the general health improved. The night sweats, from which she suffered severely, entirely disappeared.

CASE 51.—This man, aged 45 years, had ten months before coming to me commenced with deforming articular rheumatism in the feet. Since then the disease had spread to the ankles, hands, wrists, and shoulders. There was a strong rheumatic history.

The patient took the baths for two months with much benefit, and I heard afterwards from his doctor that he

had improved wonderfully and could get about his work, which was that of a farmer.

CASE 52.—Occurred in a gentleman aged 25 years. Had commenced three months previous to my seeing him, and had involved the fingers, right wrist, and shoulder, left elbow, both knees, right ankle, and toes of right foot. There was great effusion in all these joints, and the greatest difficulty in walking. The pain at night was intense, with much starting in the knees.

After 28 baths the patient went to the country for six weeks, and then returned for a further 30, and although there was not much improvement visible when he left Woodhall, it began to manifest itself very soon afterwards, and when I saw him the following summer he was able to play tennis.

CASE 53.—A lady, aged 42 years, with great effusion and thickening of left knee. The pain was very severe, and movement nearly impossible. Had suffered with it for the past six or seven years, but was subject to acute attacks periodically. Last attack one month before coming to Woodhall. Swelling round the insertion of the left tendo achilles. The knee was much reduced in size during her stay at the Spa, and on her return the following year she said she had had no recurrence of the acute attacks, and could walk.

CASE 54.—A woman, aged 39 years. The disease had commenced when she was 16 years old, in the hip. Had been dormant for ten years, when it attacked the hands and knees. Now all joints were involved, including the temporo maxillary articulations, which were stiff.

Could not even stand on arrival, but after two courses that year began to improve rapidly, and on her return the following season was able to walk with comparative ease.

CASE 55,—A woman, aged 30 years. The disease had commenced two years previously, and now involved knees, hands, elbows, and slightly the feet. There was a family history of phthisis, and the patient was very debilitated.

A month's course produced a remarkable change in her, and on her return the following year it was observable that the joints which had been swollen had returned to their almost normal condition, and locomotion, which had been greatly interfered with, was now quite perfect.

CASE 56.—Occurring in a girl aged 16 years, was remarkable for the rapid improvement of the patient. The disease involved the fingers, right wrist and feet, and had commenced two years previously. She had a strumous appearance, and the history was phthisical.

Stayed six weeks and left greatly benefited, and I have since heard that the disease has gradually become quiescent.

CASE 57.—A woman, aged 33 years. The disease had involved all the joints, including the jaws. The hips were also somewhat stiff. Both parents died of phthisis.

On arrival could scarcely walk at all, but after being here six weeks could walk two miles without "hurting herself."

CASE 58.—Deforming articular rheumatism occurring in a young lady aged 22 years, involving ankles (where it had commenced), fingers, hands, and wrists. Strong phthisical history.

Remained one month with most excellent results, and on her return the following year it was noticeable that the disease was completely arrested, no fresh joints having become attacked, whilst the affected joints had recovered everything with the exception of their shape.

GOUT.

REMARKS ON GOUT.

A perusal of the cases under this heading will demonstrate the fact that the Woodhall treatment is a prophylactic in cases of gout.

It is not always wise to subject those who are suffering from the disease in its acute form to the baths, but in all those cases of gout which have come under treatment when the disease has been recurrent and persistent, and when there has been depression of the general organism, as is so often seen in the victims of repeated gout, we have seen some remarkable results. The quality of the blood improves, the muscular energy returns, the mobility of the joints recover, and what has been of greater value, the disease has been apparently kept in check by an annual course of the waters

CASE 59.—Aged 60 years, has suffered much from gout for many years past, and is now seldom without an attack for more than a few months at a time. He underwent a three weeks' course of treatment here in August, 1889, and returned for a further preventive course in 1890, having never been so free for many years past, having only had one slight attack during the intervening twelve months. This was without any altered mode of life.

CASE 60.—Aged 50 years, was suffering severely from gout, which attacked both feet, knees and hands. For the past fourteen years he has seldom been free from acute attacks. He underwent a month's course of treatment, returned at the commencement of 1889, and has resided here from that date. Since the attack during his first visit he has never suffered from the slightest symptom of gout, and this I attribute to the preventive course of baths he takes every spring.

CASE 61.—Aged about 55 years, has been a sufferer from gout for the past fifteen years, and has regularly every year undergone a cure at some watering-place. He first came under my care in July, 1889, and informed me that he had passed a very bad winter, having repeated attacks of gout of a very severe nature. After a month's treatment he left much improved, and returned again in 1890 for a further course, when he stated that he had suffered less during the past winter, and felt better than he had done for the last thirteen years.

CASE 62.—Aged 50 years, was first seen by me in April, 1890, and was suffering from gout, which had commenced three years previously, and was continually giving him trouble. He only remained three weeks, but returned in 1890 for a further course, when he stated that he had been perfectly free of gout, and felt in excellent health.

CASE 63.—Aged 35 years, was first seen by me in 1887. He was then suffering from a very severe attack of acute gout. This case was one of a most obstinate character, the disease being not only inherited, but also fostered by the sedentary life which was led, and by the injudicious indulgence of a too healthy appetite. After a six weeks' course he left much benefited, and returned in 1888 for further treatment, not having been troubled with any attack since his first visit. He did not repeat the course in 1889, but in April, 1890, again came under my charge, and was then suffering from gout, which had commenced in December, 1889, and had obstinately resisted all treatment.

He remained here about two months, and left free of all gouty symptoms and much improved in general health.

CASE 64.—This case, aged 40 years, had suffered for the past two months from gout in the left ankle, which was much swollen and very painful.

One month's course reduced all swelling, and there has been no return of the complaint. (One year afterwards.)

CASE 65. Age 47 years. Chronic gout affecting the left ankle, of eight months' duration. This patient had had periodical attacks for the past ten years, but had hitherto always been able to get rid of them with appropriate remedies.

Five weeks' treatment reduced all the swelling, and he was able to walk with perfect freedom. He now returns yearly for a short course, and has had no attack since his first visit.

CASE 66.—This gentleman, aged 62 years, who had suffered from gout for the past thirty years, arrived at Woodhall with an acute attack.

Daily baths and large doses of the waters abated the severity of it in two days, and after a three weeks' course he declared he had never for a long time been so free from the disease.

CASE 67.—A clergyman, aged about 40 years, arrived suffering from an acute attack in his great toe.

In three days he was able to walk comfortably, the swelling having quite disappeared.

CASE 68.—This gentleman, aged 46 years, had suffered for many years past with yearly attacks.

After a month's course of treatment has remained free for two years.

CASE 69.—This gentleman, aged 69 years, had for many years suffered from gout. When he arrived at Woodhall

there was great effusion in the right knee with pain on movement.

After one month's course the effusion disappeared, and on his return the following year he had had no further attack, and could move the joint freely.

CASE 70.—This gentleman, aged 44 years, had an attack every year for the last ten years.

He underwent one month's course at Woodhall, and returned the following year, having been perfectly free since his last visit.

CASE 71.—Aged 50 years. Yearly attacks. The wrist is now swollen and has been so for some weeks.

A three weeks' course reduced the swelling and kept him free until his return the following year, when he had a slight attack which kept him in bed for two days.

CASE 72.—Aged 50 years. This gentleman has had periodical attacks which last some weeks and are extremely painful.

One month's course kept him free for the year with the exception of an attack for five days with swelling but very little pain.

CASE 73.—This gentleman, aged 48 years, visited the Spa in 1890. He had attacks of gout every two years, the last confining him to his bed for three weeks.

One month's course kept him free until his return in 1892, when he underwent a similar treatment as a preventative.

CASE 74.—This lady, suffering from gouty pains in limbs and gouty changes about knuckles, with a good deal of bronchial irritation, has been under my care for the past three years with the most excellent results, all the symptoms being relieved and the joint changes arrested.

CASE 75.—Aged 56 years. First attack twelve years previously ; the present one, which involved both feet, ankles, knees, hands and elbows, was of four months' duration. Had wasted much and was in a very bad state of health.

A five weeks' course reduced the swelling in the joints, regulated the organs of digestion so that he increased more than a stone in weight, and on his return the following year he informed me that he had been perfectly free since his former visit.

CASE 76.—Aged 60 years. Chronic gout in hand and shoulder of three months' standing.

One month's treatment entirely reduced all swelling and stiffness, and prevented the recurrence of it during the year.

CASE 77.—Aged 62 years. Gouty effusion in left knee of six weeks' duration.

One month's treatment entirely removed all pain and swelling.

CASE 78.—This lady, aged 60 years, took one month's course of treatment in 1891 for gouty swelling of the right foot and both knees. She returned in 1892 and informed me she had been much better all that winter, having had no further attacks.

SCIATICA AND LUMBAGO.

REMARKS ON SCIATICA AND LUMBAGO.

We use the term sciatica to indicate a painful condition of any of the nerves of the sacral plexus, which supply the leg from the pelvis to the extremity of the foot. We might be more accurate, and by localising the pain, call each case according to the nerve attacked; we should thus

be able to speak of cases of crural, external, middle, and internal cutaneous neuralgia; also internal, saphenous, and muscular cutaneous neuralgia in the anterior aspect of the leg, while posteriorly the small sciatic external cutaneous, communicans peronei, and external saphenous nerves may and frequently are the seat of acute pain.

Practically, we find the most common seats of pain are behind the great trochanter, below the head of the fibula, the outer ankle, and dorsum of foot.

Sciatica usually creeps on gradually, the pain is never absent, but attains its maximum at stated times, frequently about two in the morning, when the victims are awakened by most excruciating pain, so severe that patients will commonly get out of bed, and we have known cases where the sufferer has sought relief by kneeling on a bed or sofa for several hours at a time.

The affection is most obstinate, and depends on a variety of causes.

A glance at the duration of our cases will demonstrate that sciatica is a malady which spreads over a considerable period, and that it is prone to relapses.

Lumbago, or lumbar neuralgia, is the form which attacks the cutaneous branches of the lumbar plexus. The most painful points are usually external to the lumbar vertebræ, somewhat above the crest of the ilium, and a point just in front of the anterior superior spine of the same bone.

Brachialgia, or neuralgia of the brachial plexus, is exceedingly common in the gouty subject. In my experience the musculo spiral nerve is the one most usually attacked, and after that the ulnar. The condition is one which will cause the patient to suffer severely; the pain is usually intermittent, being much worse at about two or three in the morning, and being of such intensity that sleep is banished, and, as a result, we have restlessness, irritability and depression of the general health state.

NEURASTHENIA.

Under this category we include all those cases which we are unable to more distinctly specialise.

The predominant symptoms which they present are cold extremities, painful fatigue, shortness of breath, palpitation of heart, starting suddenly at noises, alternate and varying emotional conditions, want of energy in all the vegetative functions, proneness to neuralgic pains after exertion, fatigue, or worry, and a subnormal temperature. Sometimes they present manifestations which mimic formidable maladies, whilst others are chiefly painted with the burst of melancholy and low spirits, "the vapours or doldrums of older writers."

Two such cases are given, and the results. Whether the bromide, &c., contained in the water or the quiet calm and natural surroundings of Woodhall contributed most towards the benefit obtained we will not attempt to solve, but certain it is that marked improvement in the nutrition of the body and diminution of symptoms supervened.

CASE 79.—A lady, aged 32 years, consulted me for occipital cervical and intercostal neuralgia. The pain would come at times with ferocity and completely prostrate her; it was always worse before and during the menstrual period; she suffered also from flutulence, constipation, and an erratic appetite. Her blood was poor, as indicated by her anæmia and subnormal temperature. The heart's action was uneasy and obvious to her consciousness, and her breathing was embarrassed on the least hurry or on ascending a hill or stairs.

She underwent treatment here for six weeks with the most satisfactory results.

CASE 80.—Occurred in a gentleman aged 42 years. He was markedly neurotic, being influenced in quite an extravagant manner by his surroundings. His most pronounced symptom was insomnia, for which he had

taken a host of the old- and new-fashioned hypnotics without any more than a temporary relief. He had recently passed through a severe mental strain. His general health state was unsatisfactory, digestion, circulation, and respiration all being carried on with uneasiness.

He was recommended a course of massage, and the Spa water as a bath and as an internal medicament, and after five weeks of this treatment he left Woodhall able to sleep for seven consecutive hours.

CASE 81.—A lady, aged 38 years, who in addition to the cluster of symptoms which we call neurotic, her predominant symptom was gastralgia, the pain was always associated with eructations of tasteless and odourless flatus, and it was clear that her sufferings were sometimes due to taking food, sometimes caused by absence of the same. The whole intestinal canal was irritable, as proved by abdominal pains, alternate diarrhoea, and constipation. Her vital powers were low, so much so that her feet were habitually cold. She sweated and trembled on the least exertion, and she was irritable, peevish, and gloomy.

After a course of baths and massage she was much better, the nervous system had become calmer, the digestion easier, and the gastrodynia quite cured. She had increased in weight, and her blood was richer and warmer.

CASE 82, aged 56 years, had suffered from sciatica on and off for the last nine years. He was first seen by me in 1889, and had then been suffering for the past three months, during which term he had been unable to do any work. After remaining here one month he left completely cured, and has since then had no return of the complaint.

CASE 83, aged 61 years, was admitted to the hospital in June, 1889, suffering from lumbago and sciatica. The attack had commenced nine months previously, and had

entirely incapacitated him from work. Had rheumatic fever thirty years ago, which had left a lesion of the aortic valves. He remained one month, and returned home to his work perfectly free from pain.

CASE 84, aged 49 years, was admitted to the Hospital in 1890, and complained of pain in the sciatic nerve, which had commenced six years previously, and was of the most obstinate character, resisting all remedies. After one month's treatment he left, feeling better than he had done for the past six years, and nearly free from pain.

He returned in November, having a slight pain on the dorsum of the foot, and informed me that he had been very well all the summer, having been able to do harvest work and make hay ; the first work he had attempted for the past three years.

CASE 85, aged 24 years, suffering from sciatica, which had troubled him for the past five months. He had previously had two other attacks, and was of a very rheumatic character generally. After three weeks' treatment the pain had nearly subsided, he was able to walk well, and returned to his work cured.

CASE 86, first came under my care suffering from pains over the sacro-iliac joints, which had been troubling him for the past twelve months, and were no doubt of a purely gouty character. He had been in the spring to some baths for two months with no result.

On the second day after his arrival, before he had undergone any treatment, he was seized with a most severe attack of sciatica in the left leg, which absolutely prevented any movement for quite ten days, and which resisted all remedies. He then commenced the baths and waters, and began to show gradual improvement. After a very severe course, lasting nearly two months, he left

free from all pain, able to walk well, and ride thirty miles daily.

CASE 87, aged 35 years, suffering from sciatica in both legs, with rheumatic pains over the lumbar region. This was the second attack within the year, and had lasted about three weeks.

After a short course of baths he left, with the pain much improved but still present. He was, however, able to ride, and the sciatica gradually vanished, and did not return.

CASE 88.—This lady, aged 70 years, had suffered for six weeks from obstinate sciatica of the left leg, which prevented sleep and rendered movement most difficult.

After three weeks' treatment the pain was much relieved, and a fortnight after her return home had entirely disappeared.

CASE 89.—This case, occurring in a lady aged 30 years, was one of obstinate neuralgia of the supra orbital nerve. It had been more or less constant for the last seven months, and was intensified at the time of the periods.

There was an apparent improvement during the time she was under treatment (four weeks), but on her return the following year she informed me she had been greatly relieved, the neuralgia occurring only at intervals, and being much less severe in character.

CASE 90.—Was a case of lumbago in a lady aged 48 years. Had had slight attacks every year for the past three years, but the attack, which had lasted seven weeks, had been much more severe than the former ones.

After five weeks' treatment the pain had quite disappeared.

CASE 91.—This gentleman, aged 54 years, had suffered from brachialgia for three months before coming to Wood-

hall, and had been prevented from shooting or using his arm, movement intensifying the pain.

Four weeks' treatment was successful in relieving the complaint, and he was able to move his arms with perfect comfort and freedom.

CASE 92.—Was one of sciatica occurring in a man aged 63 years, who had suffered for the past ten weeks and had formerly had repeated attacks.

When he left after four weeks' treatment all pain had disappeared.

CASE 93.—This lady, aged 60 years, had suffered severely from neuralgia attacking the scalp, which was of rheumatic origin.

Five weeks' treatment relieved her, and on her return the following year for a further course she informed me that she had never been so free for several years past.

CASE 94.—Brachialgia occurring in a gentleman aged 70 years, affecting the musculo spiral nerve. He was very gouty and had suffered from the attack for seven weeks. Had previously had sciatica.

After four weeks' treatment the pain had disappeared.

CASE 95.—This case, occurring in a man aged 42 years, affected the musculo spiral nerve of right arm. He had previously had sciatica and had suffered from this attack for ten weeks after influenza.

A five weeks' course entirely relieved all pain.

CASE 96.—A lady, aged 28 years, had suffered much from neuralgic pains flying about and affecting first one and then another part of the head and body. These pains were exaggerated at the periods, and at night often prevented sleep.

Was much benefited by a five weeks' course, the neuralgia being of a much less severe type and only present during the periods.

CASE 97.—This case of lumbago and sciatica occurred in a man aged 38 years, and was of five weeks' duration. The pain was much increased by any movement and was worse at night.

After a month's course he could sleep and walk well.

CASE 98.—Neuralgia affecting the nerves of the head occurring in a gouty lady aged 65 years. Pains always worse at night, interfering greatly with sleep.

After a month's course the pain was greatly relieved and she could sleep well.

CASE 99.—Brachialgia occurring in a gentleman aged 39 years. Prevented him from moving his arm freely, and was of six weeks' duration.

A month's course was sufficient to remove all symptoms of the complaint.

CASE 100.—Neuralgia after influenza, occurring in a lady aged 35 years, and affecting the right side of the head, the right arm, and both legs. She was very neurotic and debilitated.

She remained at Woodhall two months and left greatly relieved, the pains having nearly all disappeared.

CASE 101.—Lumbago. This lady had suffered for three months with this complaint, which was of gouty origin, and was aggravated by damp weather changes.

She remained at Woodhall five weeks, and when she left the pain in the back had entirely disappeared.

SKIN DISEASES.

REMARKS ON SKIN DISEASES.

The benefit which has been manifest after treatment of cases of local eczema and the varieties of acne has been

most encouraging, and in every instance rapid permanent good has been attained.

There has been in many instances a tendency to recur, a tendency always associated with such cases, but the relapses have been of longer intervals and of less severity. The cases of psoriasis have also shown evidences of improvement, but we are not able to say that an absolute cure has been effected in any instance. We believe this to have been due to two reasons: first, the disease is one which is always spread over a long period; secondly, circumstances have not enabled us to carry out the treatment for a sufficiently long time to hope to attain this result.

We are desirous of extending our treatment to cases of all the varieties of constitutional skin diseases, and are not without hope that in such cases as lichen ruber and pityriasis rubra we have in the Woodhall Spa water a remedy of great power. A glance at the chemical analysis will support us in the hope, because we find its constituents embrace all those drugs which have been sanctioned by time and experience as possessing a curative power in every symmetrical and persistent form of skin disease.

PSORIASIS.

CASE 102—Aged 28 years, was first seen by me in 1887, and was suffering from psoriasis, involving most parts of the body with the exception of the face. She had had it for some years past, and treatment had been of little avail.

During her course here the skin assumed a healthier appearance, and there were no signs of fresh patches. She returned in 1888 and 1889, and declared that she was much better in the winter than she had been before taking the baths.

CASE 103.—Had lived for many years in India. He came under my care in 1889, suffering from psoriasis, covering

most of the body. He was of a gouty disposition, and was much troubled with dyspepsia. He took a month's course of baths and waters and was greatly benefited, the skin being in a much healthier condition.

He returned in 1890 for a further course, when he assured me he had spent a good winter.

CASE 104, aged 18 years, a domestic servant, was admitted into the Alexandra Hospital, suffering from psoriasis affecting the legs and arms, of three years' duration. After one month's treatment of baths and waters she left, the psoriasis having much improved, there being no new patches, and the old ones gradually dying.

CASE 105.—This case, occurring in a girl aged 19 years, affected the extensor surfaces of the knees and elbows, and had commenced eighteen months previously.

After a month's course the spots were gradually dying away, and no new ones had appeared.

CASE 106.—This case was very obstinate, the lady having suffered from psoriasis for the past three years, the body and legs being greatly affected.

She was only able to remain a fortnight, but this short course and a continuance of the water at home had the most beneficial results, as she wrote to me one month after leaving that "all the redness and most of the scaly patches had been removed."

ECZEMA.

CASE 107, aged 28 years, was first seen by me in the summer of 1888. She then came in the hope that a course of these waters would prevent a return of eczema, which had always attacked her every winter for some years past.

After a month's course here she left, but returned in September, 1889, for a preventive cure, having been *perfectly free* during the intervening period.

CASE 108 was first seen by me in the summer of 1888, and was then suffering from very chronic eczema on the right wrist, of some months' standing. She was only able to remain here a fortnight, but continued the cure at home by compresses of the Mutterlauge to the wrist, and taking the waters internally for a further period of one month. On her return in 1890 for some slight eczema she had on the right leg, she informed me that this treatment had effected a complete cure.

CASE 109, aged 50 years, was seen by me in October, 1890, and was suffering from eczema on the palms of both hands. She had had repeated attacks since childhood, the present one having lasted four months. She also suffered much from dyspepsia and acid eructations.

She commenced to improve from the first, and after a month's treatment she left with the hands nearly well, the skin being smooth and natural, and the digestive disturbance completely rectified.

CASE 110.—This was a case of eczema of the face, of three years' duration, occurring in a woman aged 39 years.

She was at the Spa in the spring of 1891 for three weeks, and returned in the autumn of that year for a similar course, and left completely cured.

CASE 111.—This occurred in a gentleman aged 70 years, and involved the entire head and body. It was most intractable, of one year's duration, and all treatment had proved ineffectual.

A three months' course was successful in removing all signs of the complaint, the skin returning to a normal condition.

CASE 112.—This case was confined to the hands and face, was of six months' standing, and was of gouty origin. There was great irritation, and the patient complained that it always kept her awake.

Four weeks' treatment removed all symptoms.

CASE 113.—Occurred in a lady aged 26 years, of a strumous condition, and had troubled her for the past three months. The skin was in a most inflamed state, and the irritation most pronounced.

She remained at Woodhall for five weeks, and when she left the disease had commenced to subside, and one month afterwards had entirely disappeared.

CASE 114.—This was a case of specific eczema of the palms occurring in a labourer aged 48 years, an inmate of the Alexandra Hospital, and had troubled him for some months.

Four weeks' treatment was sufficient to remove all signs of the complaint, and restore the skin to a healthy condition.

CASE 115.—A gentleman, aged 48 years, suffering from eczema of the nose, which had troubled him for six months.

Four weeks at Woodhall improved the condition of the skin materially, and he wrote to me six weeks afterwards that all signs of the complaint had disappeared.

CASE 116.—This was of strumous origin, and occurred in a gentleman aged 30 years, and attacked the upper lip and back of right hand.

He remained at Woodhall four weeks, and when he left, although the complaint had not entirely disappeared, the condition of the skin had greatly improved.

ACNE.

CASE 117, aged 54 years, suffering from acne rosacea, with which she had been troubled for five years. The digestive organs were faulty, and the bowels inclined to constipation.

After a month's treatment she left, the face having much improved and the dyspeptic trouble having disappeared.

CASE 118, aged 50 years, was suffering from acne, which attacked the face and back. She was greatly benefited by the month's treatment, the acne vanishing entirely, and never re-appearing until after a severe illness she had in 1890, when she returned for further treatment, with the same satisfactory result.

CASE 119, aged 20 years, was seen by me in the summer of 1890, when she was suffering from acne on the face and back. She had had it on and off for seven years, and had tried many remedies unsuccessfully.

The acne was much improved by the treatment here, the old spots gradually fading and no new ones forming, whilst the indigestion from which she suffered gave way to the influence of the waters.

CASE 120.—Occurring in a lady aged 30 years. She had suffered eighteen months; both nose and chin were involved.

She remained five weeks, with much benefit; and on her return next year for rheumatism, she said that the spots had, shortly after leaving, entirely disappeared.

URTICARIA.

CASE 121.—This case occurred in a lady aged 65 years. She had for some years been troubled with nettle rash, which would make its appearance whenever the digestive organs were in the slightest way upset.

Four weeks' treatment much improved her, and rendered the attacks much less frequent than they had been before her visit to the Spa.

CASE 122.—Occurring in a gentleman aged 54 years. For the past month he had been troubled with repeated attacks, which always came on at night, and prevented him sleeping.

He remained at Woodhall a fortnight, and left perfectly cured.

TUBERCULAR DISEASES.

REMARKS ON TUBERCULAR DISEASES.

The rapid and striking improvement which has been observed in cases belonging to this group has been most encouraging, for two reasons.

First.—Because it was some time before we discovered they were benefited by the Woodhall Water. Secondly—Because the low and slow inflammatory action, which is typical of all tubercular processes, has always been a stumbling block to therapeutics.

The good results were obtained without any surgical operation, and the improvement in the general nutrition of the patients would encourage a further trial in all those cases which are now believed to be caused by, or at all events associated with, the “tubercle bacillus.” We have a profound conviction that tubercular disease of the lungs, if not too far advanced, would reap benefit by the employment of Woodhall Water.

CASE 123, aged 19 years, first came under my care in 1887, suffering from tubercular disease of the left foot and of both wrists. The bones of the tarsus had been involved for the past year, and two open sinuses remained, which were deep and discharged a curdy pus. The bones involved were much thickened, and there was great matting together of all surrounding structures. The left wrist had

healed, but the right tarsus had been much affected, and there was a deep sinus on its posterior aspect.

He was hardly able to get about on crutches, the pain being so much increased if the foot was in the dependent position.

After taking thirty-five baths the sinuses had healed up, he was able to walk a short distance, and returned home greatly improved in general health. This improvement continued, and he thought nothing of a three-mile walk daily.

In the winter of 1889 the disease once more manifested itself, the left ankle again becoming involved, and when he visited this Spa in May, 1890, he had a deep discharging sinus on the dorsum of the left foot. He had lost weight, had a hectic appearance, with night sweats and relaxed condition of bowels.

After remaining here one month he returned home greatly improved. The perspiration had ceased, the bowels were regular, his weight had increased, whilst the foot had nearly healed, and he was able to walk a couple of miles without feeling any throbbing or discomfort in it.

CASE 124, aged 37 years, was admitted into the Hospital in May, 1890, with scrofulous disease of the cervical glands on both sides of neck and ulceration of the skin over them. The disease had commenced three years previously, and had resisted all treatment. There was much discharge and great weakness.

He remained six weeks, having greatly improved, the discharge being much less, and most of the ulcerations having healed.

CASE 125, aged 61 years, was first seen by me in the summer of 1889, when she had enlarged cervical glands on the left side. She was delicate in appearance, and there was a family history of phthisis.

She remained a month, no marked effect having been produced, but on her return in June, 1890, to obtain relief from rheumatism from which she was then suffering, noticeable improvement had taken place, this improvement having commenced about a month after her first visit had terminated.

CASE 126, aged 25 years, first came under my care in 1889, when she was suffering from enlarged cervical glands on the right side, which had appeared three years previously after confinement. There was no tubercular history obtainable, but the patient was of a delicate scrofulous appearance.

She was only able to remain for a short course at that time, but returned in 1890 and again this year, and after each visit a remarkable diminution had taken place in the size of the glands.

CASE 127.—This case, occurring in a gentleman aged 52 years, was one in which the bones of the right tarsus were involved. There was a small sinus discharging pus, and the foot was in such an inflamed condition that it was with difficulty put to the ground.

After one month's course of treatment he could walk on the foot, the sinus had nearly closed, and the general health had greatly improved.

CASE 128.—Occurred in a lady aged 48 years, who had the cervical glands on both sides enlarged. They had commenced two years previously, and all treatment had been unavailing.

A six weeks' course was attended by great benefit, and she informed me on her return, three years afterwards, that the swelling had nearly disappeared, but, owing to a severe strain brought on through nursing, they had commenced to enlarge again.

CASE 129.—Enlarged cervical glands on left side occurring in a gentleman aged 40 years. They had commenced eight weeks previously, and were increasing in size.

A four weeks' course of treatment succeeded in reducing the swelling, and, after leaving, they gradually returned to their normal condition.

CASE 130.—This was a case of strumous affection of the right elbow joint, which had commenced two years previously, and had been gradually getting worse. She was much debilitated.

A month's course in the spring, and another in the autumn, was most beneficial to her general health, as well as to the local condition, which had greatly improved.

CASE 131.—This case, occurring in a young lady aged 22 years, was one of enlarged cervical glands of the right side, and was greatly benefited by a month's course at Woodhall.

CASE 132.—Enlarged cervical glands on both sides occurring in a young lady aged 18 years, with a strong phthisical family history. The skin on the right side was much inflamed, and threatened to ulcerate.

A three weeks' course at Woodhall, and continuing the water at home, was most successful, as, when I saw her the following year, the swelling had greatly decreased in size.

CASE 133.—This case occurred in a young lady aged 15 years, who came to Woodhall with enlarged cervical glands on the right side, which completely disappeared after a five week's course of treatment here.

CASE 134.—Enlarged cervical glands on both sides of neck, of one year's duration, occurring in a lady aged 20 years.

She remained at Woodhall five weeks, and when she left the glands had much decreased in size.

DISEASES OF WOMEN.

REMARKS ON DISEASES OF WOMEN.

It will be noticed that under this class are included cases of fibroid enlargement of the uterus and fibroid tumours, also instances of metritis with their associated symptoms. These cases are, perhaps, the most obstinate and most common the gynæcologist is called upon to treat, and although it is not claimed that the bromo-iodine treatment of Woodhall Spa will cause absorption of a fibroid mass or cure a uterine displacement, still it is a fact that marked amelioration of symptoms and improvement of physical signs has followed our practice in this class of case.

Not a little of this good we believe is caused by the sedative effect of the Bromide contained in the water, which lulls the nervous system of those who are the victims of uterine troubles, and it is scarcely necessary to point out how important and constant these symptoms are. The calm and quiet of Woodhall is most beneficial to all such, and we firmly believe that an extended experience will corroborate our views.

CASE 135.—Mrs. —, aged 36 years, suffering from fibroid enlargement of the fundus uteri. This enlargement, supposed to have commenced about two years previously, can just be felt externally. The periods are more frequent than normal (every three weeks), and are somewhat excessive.

After taking twenty-eight baths the patient returned home, and continued the treatment there by means of compresses of the Mutterlauge and internal use of the water.

Writing some months afterwards she stated that her doctor did not consider it necessary for her to return to

Woodhall, the treatment having been so beneficial that no further improvement could be expected.

CASE 136.—Mrs. —, aged 48 years, suffering from a fibroid enlargement of the posterior wall of uterus. Complains of menorrhagia, back-ache, and inability to walk without intense bearing-down pain being produced.

Was greatly benefited by a month's course of these waters, and on her return here in the autumn she stated she was able to walk without discomfort, and that the menorrhagia had much decreased.

CASE 137.—Mrs. —, aged 40 years, has now been here for about one month yearly for the past four years, and has been steadily improving since first coming. On arrival she suffered from a fibroid of the uterus, with severe congestion of the ovary, preventing her from taking any walking exercise, and frequently confining her to bed.

She can now walk perfectly well without experiencing any pain, and the fibroid has much diminished in size.

CASE 138.—Mrs. —, aged 33 years, first seen by me in March, 1889, was suffering from sub-involution, with the following symptoms: lumbar pains, inability to walk without producing bearing-down pain, menorrhagia, and various nervous troubles.

After a month's treatment she was greatly improved, the difficulty in walking having disappeared, and the lumbar pains much relieved.

She returned for a further course in 1890, and was to all intents and purposes in perfect health.

CASE 139.—Mrs. —, aged 30 years, paid her first visit here in the summer of 1889 to try and obtain relief from dysmenorrhœa, from which she had suffered for the past six years.

After a six weeks' course she left, the last menstrual period having been of comparative ease, but returned in April, 1890, for further treatment, the last period having again become troublesome.

Since she was first here, until just before her return, she had experienced no pain, and the headaches from which she had formerly suffered had been quite relieved by her previous treatment.

CASE 140.—Mrs. —, aged 37 years, was first sent here in July, 1890, by Dr. H. C., suffering from chronic enlargement of the ovary, of eight or nine years' duration. After one month's treatment she left, but returned some six months later, when Dr. H. C. wrote me that he was perfectly satisfied by the improvement which had taken place in her local condition, and he trusted that a second course of treatment would effect a perfect cure.

CASE 141.—Miss —, aged 35 years. Uterine fibroid, which was discovered two years previously, and has been increasing in size. The periods, which are excessive, are more frequent than they should be.

She remained six weeks at Woodhall, and although there was no apparent diminution in the size of the tumour, she informed me afterwards that the waters had had great influence in reducing the hæmorrhage, and rendering the periods less frequent.

CASE 142.—Mrs. —, a young lady who had five years previously been attacked with peritonitis, presented herself for treatment, suffering from metritis. There was severe pain, leucorrhœa, and the periods returned every tenth day.

After remaining six weeks at Woodhall the periods had become quite regular, and the pain much abated.

CASE 143.—Miss —, aged 25 years, suffering with endometritis, with a great deal of purulent discharge, which created most intolerable irritation.

Underwent a five weeks' course of treatment, with the most excellent results, the discharge completely disappearing, and with it the irritation.

CASE 144.—Mrs. —, aged 34 years. Fibroid of uterus of eight years' duration. The periods, which are quite regular, are very profuse, and accompanied by severe pain and sickness.

Thirty baths reduced the size of the tumour, the periods were much easier and less profuse, and there was no vomiting.

CASE 145.—Mrs. —, aged 35 years. Had had two children and three miscarriages. Is now suffering from sub-involution, with great back-ache and menorrhagia. She is quite unable to walk, the pain caused by exercise being so excessive.

She remained at the Spa five weeks, and left much benefited, being able to walk for an hour at a time without pain. On her return the following year she informed me that the periods had regained their normal condition.

CASE 146.—Mrs. —, aged 48. Suffering from a small fibroid at the back of the cervix uteri. There was menorrhagia, great back-ache, and inability to walk without bearing-down being produced.

Two courses, one in the spring and the other in the autumn, greatly improved her condition, as she was able to walk without pain, and the periods were quite regular and not excessive.

CASE 147.—Mrs. —, aged 47 years. Had suffered for the past ten years from a fibroid of the uterus, which pressed on and irritated the left ovary, which becomes at the periods very congested. Menstruation is quite regular, but is accompanied by pain, and at all times exercise increases this.

The first year she was at Woodhall relieved all the symptoms, and, after returning three years, menstruation had ceased, and the fibroid had diminished in size.

CASE 148.—Miss —, aged 32 years, had suffered for six years, on and off, from ovaritis. The periods, which appeared every three weeks, lasted five days, were very scanty, and accompanied by great pain.

A five weeks' course at Woodhall relieved the symptoms greatly, as, for seven months after the treatment, she experienced no pain, until a chill produced the same condition of affairs. This a second course at Woodhall removed.

CASE 149.—Miss —, aged 25 years, had suffered for the past five years from dysmenorrhœa, which had been gradually getting worse; was very neurotic.

A five weeks' course was of benefit to her, as she wrote to me that she had certainly suffered less at the periods since being at Woodhall.

CASE 150.—Mrs. —, aged 48 years. This case of uterine fibroid and ovarian congestion was relieved by repeated yearly visits to Woodhall. When she first came to the Spa she was unable to walk, and had frequently to remain days at a time confined to her bed. When I last saw her she was able to take a fair amount of exercise, and attend to her ordinary household duties.

CASE 151.—Mrs. —, aged 47 years. Uterine fibroid, from which she had suffered for two years. She was very anæmic, as there had been for some time constant hæmorrhage.

Twenty-eight baths relieved the condition greatly, as the periods became quite regular and the amount not excessive, and on her return the following year I was able to observe a great improvement in her general health.

CASE 152.—Miss ———, aged 35 years. Uterine fibroid, the size of a cocoanut. The periods are very irregular, sometimes missing altogether for a month, but more frequently arriving before their time, and excessive in amount. There is great neuralgia down the legs and across the lumbar region.

A lengthened course at Woodhall reduced the size of the tumour and relieved the neuralgia, and she returns to Woodhall yearly for a course, as she says it is the only thing that makes her comfortable and keeps her in good health.

CASE 153.—This case of uterine fibroid has been at Woodhall Spa for the past three years with the most beneficial results, the tumour having decreased in size and all the unpleasant symptoms from which she suffered having been removed. On arriving, the tumour could be felt externally, the size of a large orange, and caused great bearing-down and pain in the back. The periods were too frequent and very excessive, and at those times she suffered from sickness.

Three months after completing her first course she commenced to improve, and this improvement has been maintained by the yearly course she takes.

CASE 154.—Mrs. ———, aged 33. Ovaritis on left side of four months' duration. Pain at periods, and on standing or walking. Great depression and sleeplessness.

One month's course removed all these symptoms.

GONORRHOEAL RHEUMATISM.

REMARKS ON GONORRHOEAL RHEUMATISM.

We confess to a sense of surprised satisfaction at the rapidity with which freedom of movement and freedom from pain occurred in the cases quoted of gonorrhœal rheumatism. Certainly the result was far more rapid than results after any other line of treatment.

When we remember how in some cases gonorrhœal rheumatism drags on month after month, when we re-

member how many cases of articular mischief have their origin in this disease, and when we reflect on the rapidity of the cure effected in one case, we have a reasonable position when we assert that the action of Woodhall Bromo-Iodine Water has a singularly striking effect upon the progress and cure of this rebellious disease.

CASE 155, aged 26 years, contracted gonorrhœa three months before his visit to Woodhall. On his arrival he walked with a great deal of difficulty, seemed afraid to place his feet on the ground, used a stick, and complained of great pain when pressure was exercised on the soles of the feet. There was obvious effusion into the left knee, left ankle, and the tissues over the joints were red, and pitted on pressure. The inflammation seemed to be confined to the joints originally attacked. He had no deviation of temperature. He was not liable to rheumatic attacks. When first seen he had a muco-purulent urethral discharge, which varied from time to time.

He remained at Woodhall for three weeks, and at the end of that time the joint manifestations, and tender soles of the feet, had completely disappeared, and he went back to his work, that of a civil engineer. We have enquired about this case since, and are glad to know that there have not been any relapses, and that the patient does not suffer from any joint trouble.

CASE 156, aged 29 years, gonorrhœal rheumatism affecting the left ankle, right knee, and what is very unusual, the right wrist. The disease had existed for five months, during which time he had never been free from pain and embarrassed movements.

He had been afflicted once before, when he had also gonorrhœa. His mother had suffered much from gout, and he was a man who had been subject to muscular pains and frequent nasal catarrhs. He was of the coarse red type, which so often become rheumatic, and was a large eater.

He remained at Woodhall for four weeks, and when he went away he was practically well; he could walk three miles, he was not perceptibly lame, and he had neither effusion into the joints or redness of the contiguous cellular tissue.

It is worth remarking that in both instances the urethral trouble subsided side by side with the improvement in the joint affections.

CASE 157.—This case of two years' standing was one in which the right ankle had been attacked after gonorrhœa, and had never completely recovered. On first seeing it, there was a thickening all round the joint, but no effusion. Standing or walking caused great pain, which was also transmitted to the plantar surface. There was acidity and fleeting rheumatic pains in other joints.

The patient remained a month, and left greatly improved, and I have since heard from his medical attendant that he is quite sound.

CASE 158.—This case, occurring in a man aged 34 years, came here for treatment immediately the attack commenced. He had had it two years previously, during an outbreak of gonorrhœa, when it lasted eight months. Now the left ankle was much swollen, and the metatarso phalangeal joint of the second toe of the same foot was affected. There was also pain in the plantar ligaments.

He remained here six weeks, and although the disease had not altogether disappeared the symptoms had abated, and the pain was considerably less.

CASE 159.—In this case the disease had manifested itself for five months. The knees were enlarged, and walking was performed with great difficulty. There had been iritis, and the general condition was very low. The patient remained one month, and slowly improved from the commencement; and, on his departure, he appeared to be quite cured—able to walk well, and free of all pain.

CASE 160.—This case, occurring in a young man aged 22 years, of strumous condition, was admitted into the Alexandra Hospital in 1892. On admission, both knees were enormously enlarged and distended, and there was iritis and opacity of the left cornea. His sufferings were intense, and he was quite unable to walk or stand. At night he was prevented from sleeping by the pain, and was bathed in profuse sweats.

He remained two months in the Hospital, and left greatly improved. On his return in 1893 it was found that the sight of the left eye was nearly gone, but the knees had recovered, and he could stand and walk without difficulty. He has now returned to his business.

CATARRHAL CONDITION OF THE MUCOUS MEMBRANE.

In this group it is meant to include, first those cases of nasal catarrh, so frequently met with in strumous constitutions, where there is an excess of mucus of a tenacious character; secondly, pharyngeal catarrh, that most obstinate affection, which is marked by a livid appearance and dry condition of the mucous membrane, and is produced either by gastric irritation or by direct action of cold winds and damp atmosphere; thirdly, gastric and intestinal catarrh, so frequently met with in persons of a gouty diathesis. In this class there is usually a feeling of oppression and fulness soon after a meal, accompanied with a flushed face and sometimes headache. The bowels are frequently and freely relieved, and the patient suffers from nervous symptoms, such as depression and loss of sleep. There is a marked effect on the nutrition of the body, and the sufferer gradually loses weight and colour.

In these cases the Woodhall water has exercised the most beneficial results, but it is necessary to administer it carefully in order that the secretions may be regulated and

the mucous membrane stimulated to return to its normal healthy tone.

CASE 161.—This case of posterior naso-pharyngeal catarrh, with enlargement of the left tonsil, occurring in a strumous girl, aged 18 years, was quite cured by two courses at the Spa.

CASE 162.—This was a case of pharyngitis occurring in a lady, aged 32 years, of a rheumatic habit.

She remained at Woodhall five weeks, and wrote to me a few weeks afterwards that she had quite recovered.

CASE 163.—A young lady, aged 23 years, suffering from a granular condition of the pharynx and posterior nasal catarrh. Was rheumatic, and had one year previously had effusion in the right knee.

A three weeks' course at Woodhall, and continuing the treatment at home, produced a most satisfactory effect upon the mucous membrane.

CASE 164.—Nasal catarrh, occurring in a boy aged 16 years. The mucous membrane was red, swollen, and irritable, and the discharge was at times offensive in character.

Four weeks at Woodhall, and a continuance of the treatment at home, was successful in removing the affection.

CASE 165.—This gentleman, aged 23 years, had a granular condition of the mucous membrane of the pharynx and catarrh of the posterior nares. He caught cold easily, and was troubled with an irritable cough.

He remained at Woodhall six weeks, and on his return the following year his throat was in a much better condition, and he assured me he had not had the number of colds he usually had in the winter.

CASE 166.—A young lady, with the left tonsil enlarged and a relaxed condition of the mucous membrane. This condition was increased by cold winds or a damp atmosphere.

After general treatment for one month, combined with throat sprays and douches, her mucous membrane appeared much healthier, and the tonsil had decreased in size.

CASE 167.—This case of pharyngeal catarrh of some months' standing, occurring in a young lady of anæmic habit, was benefited by a course of waters and throat sprays, and at the end of six weeks her general and local condition had completely altered for the better.

CASE 168.—This lady, aged 60 years, had suffered for the past three years from intestinal catarrh, marked by obstinate diarrhœa, particularly after the morning meal. There was a gouty condition of the fingers and severe neuralgic pain in the hands.

After remaining eight weeks she was much better, the digestion had improved, and the bowels were relieved once only in the day, either before or after breakfast.

CASE 169.—This was a case of intestinal catarrh, occurring in a lady of gouty habit aged 44 years. She suffered severely from flatulent colic and profuse diarrhœa. Notwithstanding the apparent inability to assimilate food she had increased greatly in weight, until all exercise was accompanied by intense fatigue, with difficulty of breathing.

She remained here four weeks. She was restricted to a limited diet and small doses of the water, and on leaving she had reduced her weight twelve pounds, and the flatulence and diarrhœa had disappeared.

GALL STONES AND LIVER DERANGEMENTS.

The subject of engorged liver appeals so generally to many of us that it is with satisfaction I am able to state that this treatment has proved most successful, not only among those who are the victims of sedentary habits and high living, but also to those whose livers have become torpid from a residence in hot climates, &c. Experience has taught that the latter class has received as much benefit from a course here as from a Carlsbad "cure," and when it is remembered the stimulating action the chlorides possess over the liver cells, it will readily be understood why this class of case should be so particularly suitable for treatment here.

Cases of catarrh of the bile duct, gall stones and hæmorrhoids (the latter in the early stage) have also been treated with success.

CASE 170.—A gentleman, aged 55 years, who had been jaundiced for five weeks, first visited the Spa in 1889. There was enlargement of the liver and great tenderness over the gall-bladder, sickness, constipation, fæces white and offensive, whilst the urine was heavily loaded with bile. He was also suffering with an attack of gout in the right foot, which had visited him yearly for the last fourteen years.

He remained six weeks, and left greatly improved, the urine and fæces being normal, the appetite having returned and the gout having disappeared.

He returned the following April, when he told me that he had been constantly at work since leaving here, but had had a return of the jaundice shortly after Christmas, which had lasted two weeks.

CASE 171.—This case of gall stones, occurring in a lady, aged 30 years, is interesting, in that three courses have appeared to have entirely removed the cause of the attacks from which she so frequently and repeatedly suffered.

After the first course she had a much better winter, with less pain, the attacks being less frequent and of shorter

duration. She had lost the icteric tinge, and the digestion had greatly improved, and now for the past year she has been practically free from symptoms.

CASE 172.—A lady, aged 50 years, suffering from a torpid condition of her liver, with great acidity, flatulence, constipation, fæces showing a deficiency of bile, and urine loaded with urates.

After a month's course the acidity and flatulence disappeared, the bowels were regular, and there was a free flow of bile. The urine had increased in quantity and was of much lighter specific gravity.

CASE 173.—This was a case of engorged liver and hæmorrhoids, occurring in a gentleman of 56 years, of sedentary habits.

Three weeks' treatment induced the liver to perform its functions more satisfactorily, the condition of the bowels being regular, and the hæmorrhoids disappearing.

CASE 174.—This lady had suffered for two years from gall stones, which had given her the most intense pain.

She remained here one month, during which time she had one short attack, but on returning the following year she informed me she had been entirely free since then.

CASE 175.—Congested liver, occurring in a gentleman aged 44 years. The liver region was tender, and previously to coming here he had been very sick for ten days; suffers much from dyspepsia. The bowels are regular, but the urine is loaded.

After remaining here three weeks the liver was acting properly and the digestion was perfect. The urine was copious and clear.

CASE 176.—This case, occurring in a gentleman who had resided for upwards of thirty years in India, was one of congestion of the liver, hæmorrhoids, and eczema. He

had had attacks of gout, the last one two years previously. Tongue was coated, digestion bad, bowels constipated, urine loaded and scanty, the conjunctivæ yellow.

After remaining here five weeks the hæmorrhoids caused no inconvenience, the digestion had improved, and the kidneys were acting freely. The eczema had disappeared and the liver appeared to be much more active.

GENERAL REMARKS ON BROMO-IODINE WATERS.

The following is the report of an analysis of the Woodhall Spa, made by Professor Wanklyn :—

Chloride of Sodium	...	1330·00
Chloride of Calcium	...	111·00
Chloride of Magnesium	...	91·20
Carbonate of Soda	...	10·00
Sulphate of Soda	... ..	·30
Nitrite of Soda	... ..	·55
Free Iodine	... ..	·20
Iodine (as Iodate)	... ..	·20
Iodine (as Iodide)	... ..	·40
Bromine (as Bromide)	...	3·40
Peroxide of Iron	... ..	traces

If this analysis is compared with that of the waters of Kreuznach, Hall, Dürkheim, Krankenheil, Kissingen, Friedrichshall, or Gerolstein, which represent the best known of the Iodo-Bromated waters, it will be found that Woodhall is richer in the quantity of chlorides combined with sodium, calcium and magnesium, than any other water, whilst the amount of bromide and iodine free and in combination, makes Woodhall Spa water pre-eminently the most potential amongst the known waters of this class. It may appear to some that it is impossible that such a small amount of iodide and bromide can have a

specific action upon the inflammatory deposits which occur in the cases of rheumatism, scrofula, or gout. To such we say, compare the actions of the alkaline purges, and it will be found that so subtle, so secret are the workings in the laboratory of Nature, that, what in the ordinary way would be an infinitesimal and inert dose of sulphate of soda or sulphate of magnesium, becomes in the waters of the natural springs an efficacious and ample purge. Just so it is with the waters of Woodhall Spa. Here we have in combination the chlorides with iodine and bromine, and it is striking to see the rapidity and certainty with which many of the products of simple inflammation disappear while people are living at Woodhall and undergoing the treatment.

For our part we do not consider it right to overestimate the action of a water in diseases known to be incurable, at the same time it is unwise to deny their power, and useless to deny the evidence of actual experience. It is an incontestable fact that diseases are cured and relieved by the use of natural mineral springs, which have resisted all other efforts, hence their popularity, the early recognition of their value, and their increasing success. In England we have allowed our mineral waters to remain almost unknown; we have preferred to send our patients to Continental Spas, because we have either not known the constituents of our own waters, or we have doubted the social and sanitary surroundings of the place.

It is not possible to estimate the action of any mineral spring by taking each salt and trying to explain its action on the secretions and excretions of the body. We are only able to know the combined physiological action of the water, and this is exactly what we have endeavoured to accomplish. For the convenience of others we will give a few practical conclusions at which we have arrived. We will then endeavour to apply these conclusions to the results obtained.

ACTION OF WOODHALL SPA WATER UPON THE ABDOMINAL VISCERA.

The drinking of the water detaches and dissolves the mucus which so often covers the interior surface of the stomach. The water also excites the action of the gastric follicles. This action is continued to the mucous glands of the intestinal canal and we have increased secretion, increased peristaltic action of the bowels, increased excretion of fæcal matter (or more complete emptying of the rectum), and returning assimilation and nutrition. In some cases, where small doses only can be taken, a sedative action is observable, resulting in lessened secretion, with constipation, hence its value in catarrhal conditions of the intestinal canal.

ACTION OF THE WATER UPON THE KIDNEYS.

The action of the water is practically to increase the quantity of urine voided, which is simply mechanical, and to diminish the amount of uric acid in those who have uratosis. We know that conditions caused by an excessive amount of uric acid in the organism are cured by use of Woodhall waters, but whether these curative results are due to oxidation of uric acid it is impossible to determine. It seems to us more probable that the soda combines with the uric acid, and is cast out as the only soluble urate of soda.

EFFECTS UPON THE NUTRITION OF THE BODY.

It has been a conspicuous fact that all those who have visited Woodhall have shown evidence of increased respiratory, circulatory, and digestive power, which has been proved by an increase in the quantity of red blood corpuscles, an increase in the appetite and digestion, and increasing energy; in point of fact, we do not remember a single case in which a residence at Woodhall has not improved the general health. What has been striking has been the marked sedative action which the treatment

has had upon the nervous system. In several instances we have found an irritable and impressionable state of organism, gradually followed by a calm and quiet state, in which sleep has been continuous, refreshing, and natural; and the odd pains which we are accustomed to group as neuralgic have disappeared. This may have been due to the quantity of bromide which the water contains, but is also doubtless to a great extent due to the general improvement in the nutrition of the body. We would wish to point out that in some instances where the treatment has been pushed, a good deal of nervous prostration has ensued, which has been shown by headache, backache, and general weariness. Where such has been the case we have always found a diminished quantity of water internally, and a less time spent in the bath, followed by the usual advantages. We need not be surprised at this, because it is found by experience that individuals vary much as regards their susceptibility to all forms of treatment.

EFFECTS ON THE SKIN.

The action of Woodhall water upon the integument has been variable. In some instances the patient has experienced an irritation of the skin; in others the effect has been a tingling sensation only. In those who have been the most influenced by the baths are those who have found the best results. We do not claim any special advantage for the development of a "crisis rash." This is only the effect of the water upon a vulnerable skin. Probably the chlorides and iodides act on the terminal nerve filaments and reflexly through them on the different organs of the body, resulting in an increased tissue metamorphosis, and absorption of morbid products.

EFFECTS UPON INFLAMMATORY DEPOSITS.

It is a well-known therapeutic fact that the iodides and other alkalies have a special action in causing absorption of simple inflammatory material. We see the most striking

example of this in the way in which iodides cause the disappearance of the later syphilitic manifestations, such as cutaneous and osseous deposits, and some of the most brilliant feats of medicine follow the administration of these salts. The Woodhall water is particularly rich in salines, and this will probably account for the action of the water in causing absorption of the inflammatory products of scrofula, gout, or rheumatism. These deposits hinder the action of all movements, and as they are gradually absorbed we find a return of free and easy action of the joints. Just so it is in cases of uterine fibroids—we do not claim that this water has the power to cause absorption of a fibroid tumour. This is outside the range of practical therapeutics, but we do assert that in and around such growths is a considerable proliferation of cells; and we do claim for this Spa the power to produce absorption of this cell growth (if it has not become organised). We also believe that the beneficial action of Woodhall Spa water is caused by the action of the salts which are maintained in solution. These salts act in two ways: first, by producing an increased excreting action of the skin, kidney and bowels, by which process more of the morbid material (which lies at the root of all rheumatic and gouty affections), is carried out of the system.

Secondly, by a local tissue change, which is caused by the absorption of the salines into the very seat of the morbid processes. Here the law of osmosis causes an interchange of fluids, and we find the salines of the blood balancing the salines contained in the water, by which action the local capillary circulation is stimulated and the morbid material is carried away.

In conclusion, we would like to call attention to the advantages derived from a combination of the internal administration of the water and its external application, and in many instances we have convinced ourselves that local massage by a trained rubber has been followed by the best results.

ALEXANDRA HOSPITAL, WOODHALL SPA, LINCOLNSHIRE.

The following are the Rules :—

Life Governors for every Twenty Pounds, and Annual Subscribers for every One Guinea subscribed, shall be entitled to nominate one In-patient annually.

Patients suffering from advanced stages of Pulmonary Consumption, or any infectious disease, as also incurable diseases, shall not be admitted.

No person shall be admitted unless his or her case be certified by a duly qualified Medical Practitioner to be a fitting one.

Every Patient must defray all expenses connected with the journey to and from the Hospital.

Every Patient to pay 10s. per week during residence in Hospital.

Every requisite, except personal clothing, shall be provided in the Hospital.

Patients shall not be allowed to receive food or drink from any other source without the sanction of the Medical Officer.

Subscribers are earnestly requested to ascertain from the Matron that there is a vacant bed before they give a recommendation.

All communications regarding the admission of patients should be addressed to the Matron.

The Alexandra Hospital, of which H.R.H. THE PRINCESS OF WALES is the PATRONESS, is capable of accommodating twenty patients, and is open all the year round.

HONORARY SECRETARY:
The Rev. J. O. Stephens,
Blankney Rectory, Lincoln.

HONORARY MEDICAL OFFICERS :
C. J. Williams.
H. W. Gwyn.

LODGING ACCOMMODATION.

			NUMBER OF SITTING ROOMS.	NUMBER OF BED ROOMS.
†Alverstone House	To be let furnished		4	8
Avenue Cottage	Mrs. Steel		2	3
†Beaconsfield Cottage	„ Humberstone		1	2
†Bridlemere	Miss Pinning		3	6
†Claremont	Mrs. Sharpe		2	4
†Cornwall Terrace, No. 2	„ Shircliffe		2	5
† do. 3	Miss Harding		2	5
† do. 4	Mrs. Marfleet		2	5
† do. 5	„ Boswell		2	5
† do. 6	„ Carless		2	5
† do. 8	„ Neighbour		2	5
†Davenport House	„ Grimble		3	6
†Egerton House	Miss Patchett		4	8
†Fairlawn			3	6
†*Fern-Lea	„ Peck		3	6
†Grosvenor Lodge	Mrs. F. Walter.		2	4
†Hartington House	„ Salmon		5	14
†Holmhurst	„ Mehew		3	6
†*Kingthorpe	Miss Roden		2	6
†*Lachemore	Mrs. D. Henderson		4	8
Mareham House	„ Huggins (sen.)		1	2
North Cottage	„ Newbery		2	3
†Oakhurst	„ Cartwright		2	4
†Oranienhof	Miss Wright		3	8
†Rosenau	To be let furnished		3	6
†Seymour Villa	Mrs. Ward		1	2
†Sleaford Villa	Miss Brown		3	6
†Stanhope Villa	Mrs. Powell		3	6
Summercourt	„ Turner		2	4
†Sylvenhay	„ Barker		2	4
†Syston House	„ Hallatt		4	9
The Bungalow	„ Wield		1	2
†The Mall No. 4	„ J. Huggins		2	3
*†Tyringham	„ Barker		3	6

* Are also Boarding Houses.

† Are connected with the Woodhall Spa Water Co.'s Main.

Ellon Lodge Preparatory School.

Mr. E. W. STOKOE, M.A., Keble College, Oxford, assisted by Mr. S. F. SYKES, B.A., Trinity College, Oxford, receives pupils between the ages of seven and fourteen.

The object in view is to fit a boy in character as well as in intellect for taking and maintaining a creditable place at a Public School. Boys are encouraged to enter heartily into all games and athletics, under personal supervision, and have every facility for Cricket, Football, Tennis, and Golf.

The accommodation at Ellon Lodge has been specially adapted to School purposes. The household arrangements are superintended by an experienced Matron, and care is taken in watching the health of delicate boys. The bracing air and dry climate of Woodhall Spa render it an admirable place for a School for young boys.

Arrangements may be made for the entire charge of boys whose parents are living abroad.

Prospectus, with full particulars and references to Parents and others, forwarded on application to Mr. Stokoe.

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